
SFY 2012 Regional Funding Plan

La Paz/Mohave Regional
Partnership Council

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Submitted to the
First Things First State Board
for January 24-25, 2011



FIRST THINGS FIRST

**LA PAZ/MOHAVE REGIONAL PARTNERSHIP COUNCIL
FUNDING PLAN SFY 2012
July 1, 2011 – June 30, 2012**

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Section I

Regional Allocation Summary

The following chart shows the total available funds to the Regional Council, by funding sources.

Allocations and Funding Sources	SFY 2010	SFY 2011	SFY 2012
Population Based Allocation	\$2,695,430.00	\$2,240,879.00	\$2,238,390.00
Discretionary Allocation	\$1,484,320.00	\$1,289,137.00	\$1,315,120.00
Other (FTF fund balance addition)		\$491,278.83	\$432,106.00
Additional Income (other than FTF tobacco tax)	\$0.00	\$0.00	\$0.00
Carry Forward from Previous Year		\$1,598,486.71	\$1,097,329.54
Total Regional Council Funds Available	\$4,179,750.00	\$5,619,781.54	\$5,082,945.54

Section II Prior Years' Review, and Planning for SFY 2012

For 2012 planning, Regional Councils are asked to review the strategies from years prior while they consider direction for SFY 2012. At their September 2010 meeting, the First Things First Board adopted priorities as were recommended by the Arizona Early Childhood Task Force. Following is the list of five priorities for First Things First action within the next one to three years. These are the roles for which FTF will establish measurable benchmarks and devote resources in order to achieve results for Arizona's young children and their families. These priorities are services which could be funded at both state and regional levels. Throughout this 2012 Regional Funding Plan, there are references to these new priorities. They are:

Quality, Access, and Affordability of Regulated Early Care and Education Settings - Convene partners, provide leadership, and provide funding for increased availability of and access to high quality, regulated, culturally responsive, and affordable early care and education programs.

Supports and Services for Families - Convene partners, provide leadership, provide funding, and advocate for development, enhancement, and sustainability of a variety of high quality, culturally responsive, and affordable services, supports, and community resources for young children and their families.

Building Public Awareness and Support - Convene partners, provide leadership, and provide funding for efforts to increase public awareness of and support for early childhood development, health, and early education among partners, public officials, policy makers, and the public.

Professional Development System - Convene partners, provide leadership, and provide funding for the development and enhancement of an early childhood professional development system that addresses availability, accessibility, affordability, quality, and articulation.

Access to Quality Health Care Coverage and Services - Collaborate with partners to increase access to high quality health care services (including oral health and mental health) and affordable health care coverage for young children and their families.

In addition, the Task Force recommended that FTF take a leadership role in three priorities that focus on program and process development at the state level. These are:

Early Childhood System Funding – Secure, coordinate, and advocate for resources required to develop and sustain the early childhood system. [This does not mean that FTF would be the sole funder of the early childhood system, but would take an active role in helping to increase and coordinate available resources.]

Early Care and Education System Development and Implementation - Convene partners and provide leadership in the development and implementation of a comprehensive early care and education system that is aligned both across the spectrum of settings and with the full continuum of the educational system.

Quality Early Care and Education Standards, Curriculum, and Assessment - Convene partners, provide leadership, and provide funding for the development and implementation of quality standards for early childhood care and education programs and related curricula and assessments. [This is integral to improving the quality of early care and education settings.]

Section II A

Progress with FY 10 and FY 11 Funding Plans and FY 12 Planning

The table below provides a summary of the Regional Partnership Council's prioritized needs and strategies for FY 12, as well as information on progress in FY 10 and FY 11.

PRIORITY NEED 1: Quality, Access, and Affordability of Regulated Early Care and Education Settings						
Description: There is a need for affordable, high-quality and accessible early care and education.						
Strategy: Expansion: Pre-Kindergarten						
Regional Title and/or short description: Regulated child care is lacking or insufficient in some communities in the region, especially the rural communities. Tuition vouchers increase Pre-K slots in public school district programs where known shortages exist, including districts with a lack of regulated child care and districts with high number of families on the waiting list to receive DES child care subsidy.						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
New slots for children	Strategy was not funded in FY 10.			120	120	140
Strategy: Expansion: Increase slots and/or capital expense						
Regional Title and/or short description: Regulated child care is lacking or insufficient in some communities in the region, especially the rural communities. These communities lack the infrastructure to provide child care without planning support and funding to build or improve buildings to be used for child care. Planning, Start-Up and Quality-Improvement Grants expand access to quality early care and education in regulated child care centers and homes. The strategy has 3 components. The first two components – planning and start-up grants – address the issue of access by supporting new programs to open and existing programs to expand to serve more children, especially infants and toddlers. The third component – quality grants – improves the quality of care by supporting programs to become accredited and purchase age- appropriate materials, curriculum, shade, play equipment, etc...						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Home-based providers	NA*	NA*	11	11	11	11
Center-based providers	NA*	NA*	15	15	15	15
*At the time of the grant award in FY 10, the service units had not been determined; however this information was collected by the grantee at the end of FY 2010.						
Strategy: Quality First (Statewide)						
Regional Title and/or short description: This strategy ensures that child care centers and homes become safer, more engaging learning environments. Quality First components include coaching and assessment, TEACH scholarships for early childhood educators and Child Care Health Consultation.						

Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Home-based providers	1	1	1	1	1	1
Center-based providers	9	9	9	9	9	9
T.E.A.C.H. scholars	18.5	18.5	2	18.5	18.5	18.5
CCHC (QF) homes	1	0	0	1	1	1
CCHC (QF) centers	9	0	0	9	9	9
Strategy: Child Care Scholarships (Statewide)						
Regional Title and/or short description: Provide temporary child care scholarships for families at or below 200% of the Federal Poverty Level as part of FTF emergency response plan.						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Children receiving scholarships	249	249	249	Strategy was not funded in FY 11 and 12.		
Summary of Progress and Challenges Rationale for Changes to FY 12 Alignment with Strategic Direction						
1. Strategy Success The La Paz/Mohave Regional Partnership Council has implemented four strategies to address the prioritized need for access to high quality early care and education programs: Pre-Kindergarten Expansion; Planning, Start-Up, and Quality Grants; Quality First; and Emergency Child Care Scholarships. Pre-Kindergarten Expansion provides preschool for 100 children who previously did not have access in some of the most remote areas of the region, including: Quartzsite, Littlefield and Topock. These are communities where there are no regulated child care settings other than the school district preschool programs. If approved in January, a new agreement will serve an additional 20 children in Bullhead. This district has more children waiting to receive Department of Economic Security (DES) Child Care Subsidy than any other district in the region. The second expansion strategy, the Planning, Start-Up and Quality Improvement Grant Program, awarded 26 grants in FY 10 including: two planning grants, seven start-up grants, and 17 quality improvement grants. Through these grants, three home-based programs were started, two centers expanded to serve infants and toddlers and one home expanded to serve children with disabilities. The third strategy implemented by La Paz/Mohave was an expansion of the number of child care providers enrolled in Quality First. The La Paz/Mohave Regional Partnership Council believes all children						

have the right to access high quality early care and education settings. Statewide funds allow eight providers in the region to participate in Quality First (6 centers and 2 homes). The strategy provides various components necessary to impact the quality of services provided including Child Care Health Consultation and T.E.A.C.H. scholarships. In order for the program to establish a presence in various communities through-out the region, the Regional Council has committed to continue supporting the 10 regionally-funded Quality First sites in the region.

The last strategy in this prioritized need is Emergency Child Care Scholarships. In March of 2009, emergency scholarships were implemented as part of the statewide emergency response plan. The scholarships were quickly used in the region and the determination was made not to continue them because the intent of the Council was that scholarships would be a temporary strategy.

2. Strategy Challenges

Several components of Quality First implementation were challenging in the first year. Delays in getting an agreement in place with the health department to provide Child Care Health Consultation (CCHC) meant that Quality First sites in the region were unable to take advantage of that component of the program in FY 10. Also, reluctance on the part of early childhood professionals in the region to participate in the T.E.A.C.H. program meant that very few Quality First sites utilized their T.E.A.C.H. scholarships in FY 10. These challenges are being addressed. The La Paz/Mohave Child Care Health Consultant is now hired and trained. The Regional Council and the Association for Supportive Child Care (ASCC) worked together to develop an outreach plan for T.E.A.C.H. that has resulted in an improved approach to outreach in the region that is focused on building relationships with providers and community college partners and supporting child care providers through the application process.

3. Strategy Changes for FY 12

Increase in funding for Pre-Kindergarten Expansion will allow the region to add another school district and increase the number of children served through this strategy.

4. First Things First Priorities

These strategies address **Quality, Access, and Affordability of Regulated Early Care and Education Settings** – The FTF Statewide Priority to convene partners, provide leadership, and provide funding for increased availability of and access to high quality, regulated, culturally responsive, and affordable early care and education programs.

PRIORITY NEED 2: Supports and Services for Families

Description: There is a need to raise awareness of the importance of early childhood and a parent's role in supporting health and development.

Strategy: Home Visitation

Regional Title and/or short description: Support, enhance and implement home visitation programs that provide parents and caregivers access to information, resources and high-quality social support.

Service Units

Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Families served	427	427	311	344	344	344

Strategy: Court Teams						
Regional Title and/or short description: Provide specialized training and technical assistance on infant and toddler mental health to Court Team members.						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Trainings provided	9	9	23	12	12	12
Children with checklist	NA*	NA*	NA*	NA*	NA*	304
Children served	100	100	200	304	304	304
*This service unit was not included at the time of the grant awards in FY 10 and FY 11; however this information is being collected by the grantee and will be included as a service unit in FY 12.						
Strategy: Food Insecurity						
Regional Title and/or short description: Expand provision of food boxes for families with children ages birth through five in the region.						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Food boxes distributed	NA*	NA*	9,048	Not funded in FY 11.		4,080
Children served	NA*	NA*	4,238	Not funded in FY 11.		TBD
Families served	NA*	NA*	2,824	Not funded in FY 11.		TBD
*At the time of the grant award in FY 2010, the service units had not been determined; however this information was collected by the grantee at the end of FY 2010.						
Summary of Progress and Challenges Rationale for Changes to FY 12 Alignment with Strategic Direction						
1. Strategy Success The La Paz/Mohave Regional Partnership Council has implemented three strategies to address the prioritized need for supports and services for vulnerable families: Home Visitation; Court Teams for Maltreated Infants and Toddlers; and Food Insecurity. The first family support strategy is home visitation. In the period from July – Sept. 2010, just over two hundred high-risk families in the region (211) received comprehensive home visitation services to prevent child abuse and neglect through the region’s home visitation strategy. Through this strategy, families receive routine developmental screening, reminders and referrals for Well Child Checks and immunizations, and information and resources to support positive parent-child interaction. The second family support strategy, the Court Team for Maltreated Infants and Toddlers, is reaching professionals across FTF regions (La Paz/Mohave including the Fort Mojave Indian Tribe, CRIT, and the						

Hualapai Tribe) to provide high-quality training on infant and toddler mental health that has not previously been available in the region. To date they have provided 32 training sessions in the region with an average attendance of 28 professionals who serve young children and families involved in the child welfare system. Training topics have included: Understanding the Indian Child Welfare Act (ICWA); Attachment; Neurobiology: Implications for Clinical Practice; Judicial and Child Welfare Decision-Making; Clinical Assessment and Intervention; Understanding the Meaning of Behavior; Early Loss, Separation, Trauma and Exposure to Domestic Violence; and Clinical Assessment and Intervention with Infants in the Child Welfare System. The team has also met two key implementation goals ahead of schedule: 1) To lay a foundation of understanding in basic mental health issues in infants and toddlers when critical relationships are disrupted through trauma or abandonment; and 2) To establish an on-site visitation room with cameras for recording court-monitored visitations to be used for further training purposes.

The third family support strategy, Food Insecurity, was funded in FY 10 as part of the FTF Emergency Response Plan and was not implemented in FY 11 because the strategy was intended to be temporary. However, it is being proposed as a new strategy in FY 12 to address the ongoing issue of poverty and continued need to reduce hunger in the region.

2. Strategy Challenges

Coordination of family support services and mechanisms to better define service areas, referral procedures and roles of home visiting providers in the region is a challenge that has been identified. This need is being addressed through ongoing Grantee Coordination meetings convened by the Regional Coordinator every other month. Also, in some cases target service numbers were not reached due to a lack of capacity to recruit qualified staff, but this issue is currently being addressed.

3. Strategy Changes for FY 12

Food Insecurity will be refunded in FY 12. (See New Strategy Worksheet page 20.)

4. First Things First Priorities

These strategies address **Supports and Services for Families** – The FTF Statewide Priority to convene partners, provide leadership, provide funding, and advocate for development, enhancement, and sustainability of a variety of high quality, culturally responsive, and affordable services, supports, and community resources for young children and their families.

PRIORITY NEED 3: Access to Quality Health Care Coverage and Services

Description There is a need to increase access to high quality health care services (including prenatal, oral and mental health services) and affordable health coverage for young children and their families.

Strategy: Developmental and Health Screening

Regional Title and/or short description: Increase access to preventive care and screening through community health workers and outreach to link families with appropriate and timely health services.

Service Units

Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Children screened	NA*	NA*	208	416	416	416

*At the time of the grant award in FY 10, the service units had not been determined; however this information was collected by the grantee at the end of FY 10.

Strategy: Therapist Recruitment (Multi-region)						
Regional Title and/or short description: Provide financial incentives to recruit therapists to the region.						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Number of therapists	This strategy was not funded in FY 2010 and FY 2011.					3
Strategy: Child Care Health Consultation (Statewide)						
Regional Title and/or short description: Provide expert advice, training and information on best practices related to child health and safety to child care programs.						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Home-based providers	20	0	0	20	20	20
Center-based providers	10	0	0	10	10	10
Strategy: Mental Health Consultation (Statewide)						
Regional Title and/or short description: Increase the number of mental health professionals with expertise in serving infant and toddlers by providing scholarships for continuing education in Infant and Family Clinical Practice.						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Home-based providers	This strategy was not funded in FY 10.			Not in regional strategy.		Not in regional strategy.
Center-based providers	This strategy was not funded in FY 10.			Not in regional strategy.		Not in regional strategy.
Professionals receiving scholarships*	This strategy was not funded in FY 10.			10	9	9**
*The La Paz/Mohave Mental Health Consultation strategy provides scholarships for mental health professionals to complete continuing education coursework in Infant and Family Clinical Practice. **The same 9 mental health professionals from FY 11 will continue for their second year in the program to complete the Harris Institute Certificate in Infant and Family Clinical Practice.						

Summary of Progress and Challenges Rationale for Changes to FY 12 Alignment with Strategic Direction						
1. Strategy Success <p>The La Paz/Mohave Regional Partnership Council has implemented three strategies to address the prioritized need for improved access to quality health care services: Developmental and Health Screening; Child Care Health Consultation; and Mental Health Consultation (Mental Health Education and Credentials). A new health strategy, Therapist Recruitment, is proposed for FY 12.</p> <p>Through the Developmental and Health Screening strategy, 208 children in some of the most remote and isolated areas of the region received appropriate and timely health care screenings, referrals and follow-up during in FY 10.</p> <p>Through the Mental Health Consultation (Mental Health Education and Credentials) strategy, a cohort of 9 mental health professionals from La Paz and Mohave Counties are completing a two-year training program to earn the Harris Institute Certificate in Infant and Family Clinical Practice.</p>						
2. Strategy Challenges <p>Delays in getting an agreement in place with the health department to provide Child Care Health Consultation (CCHC) in the region resulted in failure to meet FY 10 targets; however this challenge has been addressed. The agreement is now in place, the CCHC is hired and has been trained.</p>						
3. Strategy Changes for FY 12 <p>Therapist Recruitment will be added in FY 12 to address the critical shortage of therapists in the region. (See New Strategy Worksheet page 18.)</p>						
4. First Things First Priorities <p>These strategies address Access to Quality Health Care Coverage and Services – The FTF Statewide Priority to collaborate with partners to increase access to high quality health care services (including oral health and mental health) and affordable health care coverage for young children and families.</p>						
PRIORITY NEED 4: Professional Development System						
Description There is a need for an early childhood professional development system that addresses availability, accessibility, affordability, quality, and articulation.						
Strategy: Community-Based ECE Training						
Regional Title and/or short description: Create stepping-stones to facilitate completion of educational milestones by offering college credit for community-based training in early childhood education.						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Professionals participating	135	345	615*	200	200	200
*This is a duplicated count. Target service numbers in FY 11 and 12 are unduplicated.						
Strategy: T.E.A.C.H. (Statewide)						
Regional Title and/or short description: Expand access to T.E.A.C.H. by funding additional scholarships.						

Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
T.E.A.C.H. scholars	40	40	18	20	20	20
<p align="center">Summary of Progress and Challenges Rationale for Changes to FY 12 Alignment with Strategic Direction</p>						
<p>1. Strategy Success</p> <p>The La Paz/Mohave Regional Partnership Council has implemented two strategies to address the prioritized need for a professional development system. Community-Based ECE Training and expanded access to T.E.A.C.H. scholarships. The intent with the professional development strategies is to create stepping stones to facilitate the completion of educational milestones.</p> <p>The Community-Based ECE Training program provided 24 trainings with an average of 27 professionals attending each session in FY 10. Cohorts were offered in Lake Havasu, Kingman, Bullhead and Parker to make training more widely available in the large region. In addition, the first early childhood education professional conference was held in Lake Havasu City in June, 2010 and 141 professionals participated. Lisa Murphy, the nationally recognized “Ooey Gooley Lady,” presented the full-day conference focused on the importance of play based learning, creative art “the process, not the product,” and how to bring the excitement of science to young children. Participants received six professional development hours and materials to replicate the lessons in their classrooms. The conference was free to all participants.</p> <p>In FY 10, eighty-three (83) Professional Development Training Participants completed the Tier One Training Series consisting of sixteen training hours in early childhood education. Training topics included: Developmentally Appropriate Practices, Creating Responsive Learning Environments, Health and Safety, and Responding Appropriately to Challenging Behavior. Participants who completed Tier One were publically recognized at the La Paz/Mohave Professional Development Conference and received a \$500.00 professional development incentive library.</p> <p>In FY 10, sixteen (16) Professional Development Training Participants started a ten-month Tier Three Center Director Training Series. Training topics include: The Role of the Director, Leadership Styles, and Ethics in Early Childhood/NAEYC Code of Ethics. Each Director participant has received membership in NAEYC as part of their incentive library. Upon successful completion of Tier Three each participant will receive a \$500.00 professional development incentive library.</p> <p>The T.E.A.C.H. program has seen more effective regional outreach resulting in all 20 of the 20 regionally-funded T.E.A.C.H. only scholarships funded in FY 11 being awarded. Of these, 4 are CDA scholarship recipients and 16 are AA scholarship recipients.</p>						
<p>2. Strategy Challenges</p> <p>Participation in the T.E.A.C.H. program by staff in the region’s Quality First sites has been low. Presently, only 7 of a possible 31.5 scholarships available to staff in Quality First sites are being utilized. This is due to a variety of factors, including the large geographic size of the region and the location of the T.E.A.C.H. Specialist outside the region; a lack of coordination between the T.E.A.C.H. and Quality First programs, reluctance on the part of professionals in the region to enroll in college courses; and a lack of availability of CDA coursework in the region. It is taking time to address these issues as they arise, but challenges are being addressed and progress has been made, particularly in the area of outreach.</p>						

3. Strategy Changes for FY 12 None
4. First Things First Priorities These strategies address Professional Development System – The FTF Statewide Priority to convene partners, provide leadership, and provide funding for the development and enhancement of an early childhood professional development system that addresses availability, accessibility, affordability, quality, and articulation.
PRIORITY NEED 5: Build Public Awareness and Support
Description There is a need to increase awareness of and support for early childhood development, health, and early education among partners, public officials, policy makers, and the public.
Strategy: Community Outreach (Statewide, FTF Directed)
Regional Title and/or short description: Community Outreach Liaison to recruit and retain early childhood champions in the region, conduct outreach to local candidates and policymakers, write press releases, newsletters, articles for partner newsletters, web pages, sponsor and/or participate in local events, and conduct media outreach on grant awards and success stories.
Strategy: Community Awareness (Statewide, FTF Directed)
Regional Title and/or short description: Ensure consistent messaging about FTF by distributing FTF leave behinds and branded collateral materials at community outreach events region-wide.
Strategy: Media Campaign (Statewide, FTF Directed)
Regional Title and/or short description: Participate in statewide paid media campaign including TV, radio, newspaper, billboards, online and cinema ads.
Summary of Progress and Challenges Rationale for Changes to SFY12 Alignment with Strategic Direction
1. Strategy Success Since starting in September of 2010, the Community Outreach Liaison has created and distributed a La Paz/Mohave Resource Guide, recruited 549 Early Childhood Champions, and given 21 presentations across three FTF regions: La Paz/Mohave, the Hualapai Tribe and the Colorado River Indian Tribes (CRIT).
2. Strategy Challenges The decision was made to not fund additional media in the region due to a lack of data on impact specific to the region at the time of plan development and the perception that outreach and personal contact to build relationships are more effective to increase public support in the region.
3. Strategy Changes for FY 12 Funding for the media campaign was eliminated in FY 12.
4. First Things First Priorities These strategies address Building Public Awareness and Support – The FTF Statewide Priority to convene partners, provide leadership, and provide funding for efforts to increase public awareness of and support for early childhood development, health, and early education among partners, public officials, policy makers, and the public.

PRIORITY NEED 6: Needs and Assets	
Description: There is a need for more reliable regional data to inform decision-making and facilitate strategic planning in the region.	
Strategy: Needs and Assets	
Regional Title and/or short description: None	
Summary of Progress and Challenges Rationale for Changes to SFY12 Alignment with Strategic Direction	
1. Strategy Success The 2010 Regional Needs and Assets Assessment provided a significant amount of data and analysis on the strengths and opportunities in the region, and in particular in the outlying areas of the region, that was not previously available to inform decision-making and strategic planning in the region.	
2. Strategy Challenges Community-level information in rural areas is not available for most of the outlying areas in the large region. To address this challenge, the La Paz/Mohave Regional Council allocated funds to supplement the baseline report provided through statewide funding. Additional funds allowed a consultant to work with the Regional Coordinator to conduct key informant interviews, parent passerby interviews and focus groups in communities region-wide, including: Parker, Quartzsite, Salome, Wenden, Bouse, Kingman, Dolan Springs, Bullhead, Topock, Littlefield, Colorado City and the Fort Mojave Indian Tribe.	
3. Strategy Changes for 2012 None.	
4. First Things First Priorities This strategy addresses Early Childhood System Funding – The FTF Statewide Priority to secure, coordinate, and advocate for resources required to develop and sustain the early childhood system.	

Section II B

Budget: Regional Council Strategy Allotments

					FY 12 Proposed Allotments
	2010		2011		2012
FY Allocation	\$4,179,750.00		\$4,021,294.83		\$3,985,616.00
Carry Forward From Previous Year	NA		\$1,598,486.71		\$1,097,329.54
Total Funds Available	\$4,179,750.00		\$5,619,781.54		\$5,082,945.54
Strategies	Allotted	Expended	Allotted	Awarded	Proposed
Expansion: Pre-K and Head Start	\$0.00	\$0.00	\$600,000.00	\$480,000.00	\$744,000.00
Expansion: Increase Slots/Capital Expense	\$251,896.00	\$228,104.95	\$302,275.00	\$302,275.00	\$302,275.00
Quality First (Statewide)	\$217,377.00	\$101,168.84	\$271,556.00	\$271,556.00	\$217,750.00
Child Care Scholarships (Statewide)	\$685,414.00	\$699,339.00	\$0.00	\$0.00	\$0.00
Home Visitation	\$1,185,896.00	\$892,929.01	\$1,254,588.00	\$1,170,052.00	\$1,254,588.00
Court Teams	\$300,000.00	\$157,787.60	\$450,000.00	\$450,000.00	\$450,000.00
Food Insecurity	\$102,000.00	\$80,529.65	\$0.00	\$0.00	\$102,000.00
Developmental & Health Screening	\$238,533.00	\$194,752.21	\$325,232.00	\$325,232.00	\$325,232.00
Therapist Recruitment (Multi-region)	\$0.00	\$0.00	\$0.00	\$0.00	\$225,090.00
Child Care Health Consultation (Statewide)	\$153,333.00	\$0.00	\$153,333.00	\$145,208.00	\$160,000.00
Mental Health Consultation (Statewide)	\$0.00	\$0.00	\$100,000.00	\$94,773.00	\$100,000.00
Community-Based ECE Training	\$384,525.00	\$195,615.95	\$461,430.00	\$461,430.00	\$461,430.00
Scholarships T.E.A.C.H. (Statewide)	\$193,690.00	\$20,186.08	\$131,030.00	\$131,030.00	\$97,700.00
Community Outreach (Statewide, FTF Directed)	\$0.00	\$0.00	\$100,000.00	\$96,223.00	\$100,000.00
Community Awareness (Statewide, FTF Directed)	\$0.00	\$0.00	\$20,000.00	\$4,766.00	\$50,000.00
Media (Statewide, FTF Directed)	\$0.00	\$0.00	\$142,682.00	\$138,234.00	\$0.00
Needs and Assets	\$38,700.00	\$10,850.00	\$17,188.00	\$13,836.00	\$38,700.00
Evaluation	\$0.00	\$0.00	\$160,736.00	\$160,736.00	\$0.00
Child Care Study	\$0.00	\$0.00	\$16,447.00	\$16,447.00	\$0.00
Children's Budget	\$0.00	\$0.00	\$1,548.00	\$1,548.00	\$0.00
Parent Kits - Study	\$0.00	\$0.00	\$7,947.00	\$0.00	\$0.00
Arizona Health Survey	\$0.00	\$0.00	\$6,460.00	\$6,460.00	\$0.00
2012 Evaluation	\$0.00	\$0.00	\$0.00	\$0.00	\$186,466.00
Total	\$3,751,364.00	\$2,581,263.29	\$4,522,452.00	\$4,269,806.00	\$4,815,231.00
Carry Forward to Following Year		\$1,598,486.71	\$1,097,329.54		\$267,714.54

Section II C

Changes in Funding Level for Strategies from FY 11 to FY 12

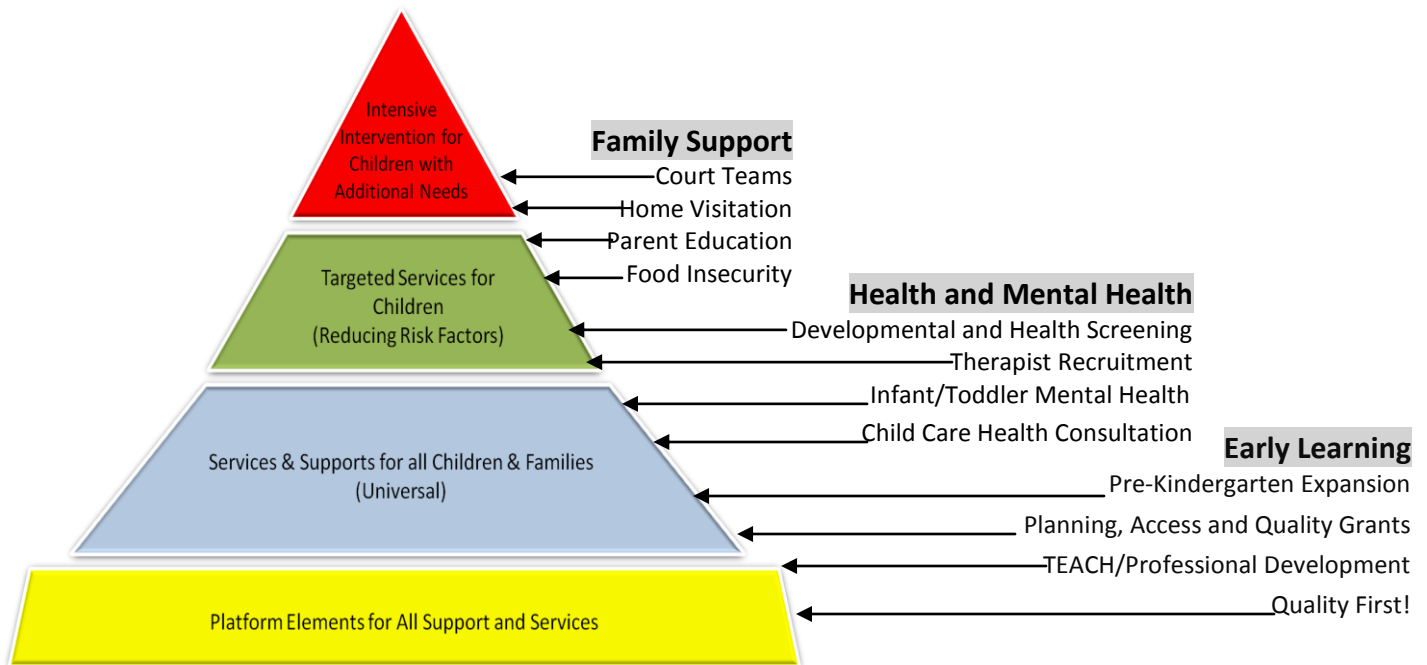
Strategy Name	Previous Funding Amount (FY 11)	New Funding Amount (FY 12)	Rationale for Change in Funding
Expansion: Pre-Kindergarten	\$600,000	\$744,000	To increase service numbers of children served
Community Awareness	\$20,000	\$50,000	To purchase additional parent education materials, leave behinds and sponsor events.
Media	\$142,682.00	0	It was determined that outreach and personal contact to build relationships is more effective to increase public support in the region.
Carry Forward		\$267,714.54	The use of carry forward from FY 12 will allow priority programs to continue in FY 13.

Section III

System Building Impact

The La Paz/Mohave Regional Council recognizes that all families need access to universal services and supports, such as quality child care, and that vulnerable children and families also need more targeted and/or intensive intervention, such as home visiting, to address risk factors and support optimal development and health. The Regional Council envisions an early childhood system that provides a continuum of services and supports, from universal to targeted and intensive, across three domains: Family Support; Health and Mental Health; and Early Learning. The intent of the Regional Council in building this system is to be responsive to the varying needs of young children and families across the region's large geography.

The pyramid model below was used during strategic planning in order to map strategies and inform discussion on the likely impact of the collective strategies in the plan.

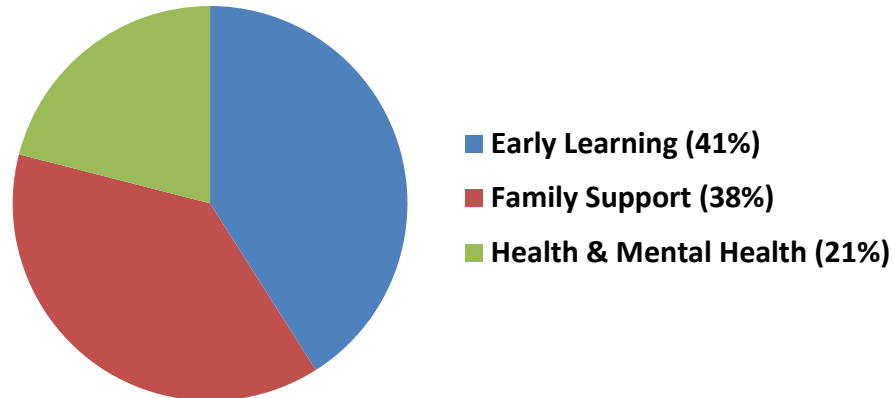


Considering the early stage in the program implementation process, the Regional Council determined the need to maintain the priorities established in FY 10 for another year. Over the past year, the Regional Council has worked together with grantees and stakeholders to further develop and refine the strategies required to reach our common goals. Considerable progress has been made in building the partnerships and relationships necessary to implement programs in each of the three domains (Family Support, Health/Mental Health, and Early Learning). The important work of connecting and growing services across domains into a comprehensive and coordinated system is ongoing.

As noted in the pie chart below, the proposed FY 12 plan allocates a significant portion of funds to each of the three domains: Early Learning (41%), Family Support (38%) and Health and Mental Health (21%). This is reflective of the Regional Council's belief that each domain is equally important and the

subsequent decision to allocate resources to each of them. From its inception, it has been the intent of the La Paz/Mohave Regional Partnership Council to provide a wide variety of services that promote early learning and support the overall health and well-being of all young children and families region-wide.

Distribution of Services by Domain



The Regional Council's intent with the Early Learning strategies is to build a foundation of learning for all children in the region. Quality First and T.E.A.C.H. Arizona expansion will build the capacity of the early childhood workforce to provide quality early education. Considerable evidence suggests that more capable and qualified professionals will provide improved care for children resulting in better developmental outcomes. Pre-Kindergarten Expansion and Child Care Planning, Start-Up and Quality Grants will address the critical issues of access and affordability, particularly in under-served areas and communities where known shortages exist.

Home Visitation and Court Teams for Maltreated Infants and Toddlers are the primary strategies in the Family Support domain. These services are targeted to families with certain risk factors, including first-time mothers and families involved in the child welfare system. The intent is to stabilize the family, prevent child abuse and neglect, and provide information and resources based on the needs of the family. A small amount of funding in the Family Support domain is also allocated to Community-Based Parent Education Programs including Fatherhood Now and Parenting Children with Special Needs.

The intent with the Health and Mental Health strategies is to connect children and families in the region who are frequently isolated, lack transportation, and live in families and communities with severely limited resources, with appropriate information, resources, referrals, and services to meet their needs. Because innovative approaches are necessary to reach the most vulnerable children and families, significant resources are allocated to strategies designed to serve families who may opt-out of more traditional health care settings for a variety of reasons. Court Teams for Maltreated Infants and Toddlers, Child Care Health Consultation, Home Visitation and Developmental and Health Screening are strategies that will reach families where they are to mitigate risk factors.

Court Teams for Maltreated Infants and Toddlers is also a coordination strategy. This strategy supports the Mohave County Children's Action Team to bring together a cross-disciplinary team of child welfare professionals from across FTF regions including La Paz and Mohave Counties and the Fort Mojave Indian Tribe, the Hualapai Tribe, and the Colorado River Indian Tribes (CRIT) at least monthly. The team includes those involved in the court system, Child Protective Services (CPS), foster parents and Court Appointed Special Advocates (CASAs), and other health, mental health and early intervention service providers. They lead a variety of efforts related to system coordination including: 1) Coordinating essential services related to health, development, and social-emotional needs of young children, birth to age five, in the child welfare system; 2) Providing ongoing specialized training in child development and infant and toddler mental health to court team members and other child-serving agencies region-wide; and 3) Identifying opportunities to improve service delivery and outcomes for vulnerable families.

Improving the coordination and communication of early childhood services in the region is critical. Grantees have noted in quarterly data submissions that services in the region are fragmented and families are often not aware of existing services. In FY 10, the Regional Council began to address this need by convening Stakeholders for a variety of work sessions, including strategic planning, capacity building, and FTF grantee orientations. Beginning in FY 11, the Regional Council utilized the Regional Coordinator to convene grantees for Grantee Coordination Meetings held every other month. The purpose of the meetings is to strengthen partnerships, find opportunities to further integrate services, and engage partners in an ongoing process to move forward along a coordination continuum from lower intensity to higher intensity activities: networking → cooperation → coordination → collaboration.

On July 27, 2010, the partners completed a Coordination Self Assessment in order to facilitate discussion on the current status of the partnership and determine appropriate next steps to improve coordination. Partners indicated substantial progress had been made in the areas of: shared vision, attainable goals and objectives, shared stake in process and outcomes, and appropriate cross section of members. Key activities partners indicated were not yet happening in the region included: influencing allocation of resources, influencing the political/social climate, engaging high-profile community leaders to motivate others, and facilitating public dialogue and maintaining regular contact with the media. These are areas for improvement the partnership will continue working to address.

None of the strategies in the current plan are funded at the level necessary to reach every member of the target population at this time. For example, there are 95 regulated child care providers in the region eligible to participate in Quality First. Statewide funding provides eight slots for Quality First and regional funding allows an additional nine centers and one home to enroll. Thus, the total number of Quality First slots is 18 of a possible 95 providers (19%). The intent of the Regional Council is to continuously use data on the impact strategies have to evaluate progress and eventually determine how and when strategies should be taken to scale.

The Regional Council anticipates continued funding for its priority programs in SFY 2013. This will be possible due to the use of carry forward from SFY 2012 along with the planned end of allotments for short- term strategies, including food insecurity and therapist recruitment.

Appendix
New Strategy Worksheets

New Strategy: Recruit and retain a ready, educated, bilingual, skilled workforce for speech/language and occupational and physical therapies in La Paz and Mohave Counties.

The La Paz/Mohave Regional Partnership Council intends to attract therapists to work with children ages birth through five in the region. There is a critical shortage of therapists with the necessary education and expertise to address the special developmental needs of children ages birth through five in La Paz and Mohave Counties. Many families in the region travel long distances to receive services or wait for extended periods of time before a contracted specialist (certified to work with children birth through five) can come to them.

According to the 2010 Regional Needs and Assets Report, key informants and parents alike cited a lack of available therapeutic services for children with special needs, either because of an absence of providers or because of the need to travel long distances to obtain services. Key informants from the provider community cited difficulty in hiring therapists for open positions. The low population density in the area, and the generally low wage structure, are serious barriers to recruiting and retaining highly skilled and in-demand medical and developmental specialists. The limited infrastructure for general medical care in the more remote areas of the region is another substantial hurdle.

This strategy is intended to provide an incentive/bonus to recruit four therapists to live and work in the La Paz/ Mohave Region. Incentives will include repayment of student loans, sign-on bonuses, moving expenses, and annual service completion bonuses for up to two years. Speech/Language Pathologists, Occupational Therapists and Physical Therapists are eligible. There is also a particular interest in recruiting bilingual therapists to work in the region.

This strategy will be administered by the Arizona Department of Health Services. The two-year incentive package will require therapists to commit to at least a 24-month service obligation working with children ages birth through five in the region. The La Paz/Mohave Regional Council and the Colorado River Indian Tribe Regional Council will collaborate on this strategy by sharing the cost to recruit a single therapist to serve both regions in Parker and La Paz County.

Lead Goal: Advocate for timely and adequate services for children identified through early screening.

Goal: FTF will build a skilled and well-prepared early childhood development workforce.

Key Measures:

1. Percentage of families with children birth through age five who report they are satisfied with the accessibility of information and resources on child development and health.

Target Population: Region-wide

	FY 11	FY 12	FY 13
Proposed Service Numbers	0	4	0

Performance Measures SFY 2010-2012:

1. # of providers of specialized services serving children birth through 5

SFY2010 Expenditure Plan for Proposed Strategy					
Population-based Allocation for proposed strategy				Estimated: \$225,090	
Budget Justification:					
The incentive package to recruit 4 therapists to the region will include both loan repayment and stipend for three years. Estimated costs are as follows:					
<u>Cost of Loan Repayment for 4 Therapists for 2 Years:</u>					
		Year 1	Year 2	Total Cost	
CRIT/La Paz Physical Therapist		\$15,000	\$20,000	\$35,000	
Mohave Physical Therapist		\$15,000	\$20,000	\$35,000	
Speech Language Pathologist		\$10,000	\$15,000	\$25,000	
Occupational Therapist		\$10,000	\$15,000	\$25,000	
Total Cost		\$50,000	\$70,000	\$120,000	
<u>Cost of Stipends Per Therapists for 2 Years (CRIT Regional Council is paying the Stipend for 1 Therapist):</u>					
Moving Expenses	Sign- on Bonus	12 Month Service Completion	24 Month Service Completion	Additional Incentives (Professional Memberships, License Fees)	Total Cost
\$3,000	\$3,000	\$5,000	\$7,500	\$2,500	\$21,000
Total estimated expenses:					
2 Years of Loan Repayments for 4 therapists: \$120,000					
2 Years of Stipends for 3 therapists: \$63,000					
Administration/Recruiting/Indirect Costs at 23% of total cost: \$42,090					
TOTAL COST: \$183,000 + \$42,090 = \$225,090					

New Strategy: Food Insecurity

The First Things First Board previously recognized and responded to the hardships endured by families due to the economy's current state of crisis. In SFY 2010, the La Paz/Mohave Regional Partnership Council supplemented the economic response efforts initiated by the Board and allocated regional funding to provide emergency food boxes to families with children ages birth through five in the region. Hardships for families in the region have continued and are exacerbated by the isolated location of some of the region's outlying areas, which places families in potentially devastating situations. Often parents do not have the resources to provide adequate food and nutrition for their children, leaving them hungry, insecure of their next healthy meal, and at risk for poor development.

Research has shown that even moderate under-nutrition, the type seen most frequently in the United States, can have lasting effects on the brain development of children. According to the Center on Hunger and Poverty, inadequate nutrition is a major cause of impaired cognitive development, and is associated with increased educational failure, elevated occurrence of health problems, and higher levels of aggression, hyperactivity, and anxiety among impoverished children.

The Regional Partnership Council has determined that the families in the region continue to experience financial hardship and food insecurity, and because eating patterns are formed early in life and may be carried into adulthood, healthy eating habits need to be developed early. The Regional Partnership Council has put forth a strategy for supporting families in need of emergency food assistance and referral to resources to assist families in obtaining stability in their children's lives.

The food assistance provided with this strategy must be nutritious and follow the Food Guide Pyramid. Additionally, the success of this strategy will require coordination with: 1) family support and nutrition programs in the region to ensure the community's resources are maximized, and 2) the WIC program to ensure access to a nutritious diet for all pregnant women and their babies. The Food Assistance and Nutrition provider will need to develop a partnership with WIC to make certain that mothers are first receiving support and infant formula through WIC resources and that First Things First funding does not supplant services currently available or covered by existing federal funding or other existing sources.

Lead Goal: Coordinate with existing education and information systems to expand families' access to high quality, diverse and relevant information and resources to support their child's optimal development.

Goal: Collaborate with existing health care systems to improve children's access to quality health care.

Key Measures:

Percentage of families with children birth through age five who report they are competent and confident about their ability to support their child's safety, health, and well-being.

Target Population:

The region's children birth through age five and their families experiencing food insecurity.

	FY 11	FY 12	FY 13
Proposed Service Numbers	0	4,080 food boxes	0

Performance Measures:

1. Number of children provided with food assistance/Proposed service #
2. Percent of children living in the region who are facing food insecurity
3. Number and percent of pregnant women and children served by WIC in the region

SFY 2011 Expenditure Plan for Proposed Strategy

Allocation for proposed strategy | \$102,000

Budget Justification:

Food boxes range in costs from \$15 - \$35 per box. An average cost of \$25 per box was utilized.